

The Fire and Emergency Medical Services News



New Hampshire Fire Academy



FALL 2006

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A Service of New Hampshire Division of Fire Standards & Training and Emergency Medical Services

“Training on the Leading Edge”

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Dear New Hampshire Fire & EMS Community:

It is getting to be that time of year where we honor the families of all those fallen in the line of duty for 2005. To add to this, one of our own New Hampshire firefighters is amongst those remembered...Lt. Chris DeWolf of the Newington Fire Department...one of the first in the nation to become a 2005 statistic. He will always be a missed friend and colleague in my mind!

As we reflect in our emergency operations and training, we must always focus one major theme: Safety! Safety includes personnel safety as well as personal safety. Physical fitness, defensive driving techniques, healthy diet, and no tobacco use are all traits of personal safety! We do not need or require a safety program for our personal habits.

This past year, once again saw more than 75-percent of firefighter fatalities in two categories: heart attacks and motor vehicle crashes!

In 2005 the United States saw 115 firefighter fatalities in the line of duty...unfortunately this number does not seem to change significantly from year to year: 2002 – 101, 2003 – 111, and 2004 – 108. This year's breakdown by nature of injury:

55 – Heart attack; 32 – Internal trauma; 8 – Asphyxiation; 6 – CVA; 6 – Other; 3 – Burns; 2 – Crushed; 2 – Electrocution; 1 – Heat exhaustion.

Please, as we enter a new season, let's all re-dedicate ourselves to the assurance that we all go home at the end of the day...without injury! Let's practice our drills the same as we operate in emergencies so our actions at emergencies are automatic...like using the brakes when driving, we don't think "I need to brake" every time we stop...we do it automatically...just as we should practice safe acts automatically!

On another note, August 25-27, 2005 we saw a couple hundred descend on the Fire Academy to complete the building of the New Hampshire Fallen Firefighter Memorial...a dream that has become a reality. A VERY sincere thanks to those who worked so hard to get this project completed...especially Hooksett Captain Gary Lambert, whose leadership and setting the example can only be summed up as exemplary! Thanks Gary and kudos to you and your staff!

That is enough for this time, we'll chat again, but please STAY SAFE!!

Sincerely, Rick Mason

CALENDAR OF EVENTS

1st Thurs. of each month (except July-August)	NH Fire Standards & Training Commission Meeting 10:00 a.m.	NHFA
2nd Thurs. of each month	Tests/Retests; sittings at 9:30 a.m. and 6:30 p.m.; preregistration required by 1st of month	NHFA
2nd Thurs. of each month	National Registry Exam for EMS at 9:30am	NHFA
Every month	Train-the-Trainers (watch for listings)	NHFA

EMERGENCY MEDICAL SERVICES:

11/3 – 11/5/06	EMT-Basic Refresher Training Program (RTP)	Fremont
11/6 – 11/15/06	EMT-Basic Refresher Training Program (RTP)	Littleton

FIRE & EMERGENCY SERVICES INSTRUCTOR PROGRAMS: Watch for future listings

FIRE OFFICER PROGRAMS: Watch for future listings

FIREFIGHTER PROGRAMS: Watch for future listings

HAZARDOUS MATERIALS PROGRAMS: Watch for future listings

INDUSTRIAL TRAINING: Watch for future listings

NATIONAL FIRE ACADEMY PROGRAMS: Watch for future listings

SPECIALTY PROGRAMS:

11/4/06 & 11/5/06	ICS/EOC Interface	Richmond Fire Dept.
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TERRORISM PROGRAMS: Watch for future listings

TRAIN-THE-TRAINER PROGRAMS:

11/6/06	Instructor I (TtT)	NHFA
11/7 – 11/9/06	Law Enforcement Response to WMD Operations (TtT).	NH Police Academy

Please check our website monthly for upcoming programs at <http://www.nh.gov/safety/fst/uprograms.html>

INSIDE THIS ISSUE

Calendar of Events	2
Code What?	3
I/C Enhancement 2006 Transition Program Rollouts Frequently Asked Questions	4 & 5
New Hampshire Fire Service Personnel Go Beyond The State's Boundaries	6
2007 NH Patient Care Protocols Rollout	6
Innovative Trauma Program Under Development	7
TEMSIS Updates	7
Firefighter/EMT Candidate Receives the Silver Star	8
Free Training & Travel!	8
Statistics for 2006 Entrance Testing	9
Important information for up coming Fire Officer I & II course candidates:	9

Code What?

A look at lights & sirens for NH's Public Safety Responders

Eric W. Perry, NREMT-P, EMS Field Services Representative

New Hampshire Revised Statutes Annotated (RSA) offer New Hampshire's Fire and EMS responders a liberal guideline on emergency response. RSA 265:8 outlines the privileges that emergency vehicle operators may exercise in emergency situations. These privileges include; parking and standing in any location, disregarding traffic control devices (stop sign, traffic lights, etc.), exceeding the posted speed limit and disregarding the governing direction of traffic flow (one way streets, left turn only, etc.).

RSA 265:8 outlines four other very important items:

- * The law states that these privileges "may" be exercised, nothing in the law mandates that agencies must use lights & sirens. There are many myths about the emergency vehicle operations, and commonly responders will assume they are mandated to use lights and sirens for various reasons, this is not the case. However, in certain cases if you chose to exercise some privileges you must use lights and sirens. The law specifically states that if you are going to exercise the speed or parking/standing privileges, lights must be used. To exercise the privileges of disregarding traffic control devices or direction of travel, operators must use both lights and sirens.
- * Regardless of the privileges that are granted under these laws, the law clearly states that the law offers no liability protection to the emergency vehicle operator in the case of operation that does not consider the due regard for the safety of others. This includes the safety of other motorists, pedestrians, and passengers in the emergency vehicle, including patients being transported in an ambulance.
- * RSA 265:8 states that the previously mentioned privileges may only be considered in cases of emergency calls. Simply stated, the law does not allow non-emergency responses, of any kind, to involve the use of lights and sirens.
- * Regardless of the privilege of disregarding stop lights or stop signs, emergency vehicles must stop for a school bus that is stopped for the purpose of picking up or discharging pupils.

Generally, RSA 265:8 offers a broad based allowance for most situations emergency vehicle operators' are challenged with. However, fire departments and EMS agencies are recommended to adopt their own policies with more stringent guidelines, than those offered by RSA 265:8, as to the use of emergency vehicles in times of emergencies. These guidelines may include items such as:

- * Mandatory seatbelt policies,
- * A limit or cap on the speeds over the posted limit an emergency vehicle may travel,
- * Emergency vehicle operator courses for all personnel,
- * Annual review of applicable emergency vehicle RSA,
- * Stopping at intersections where there are stop signs or red traffic lights,

Ultimately, the goal of every emergency responder is to go home safe after there shift, call-out, or emergency response. Knowing the laws, ensuring compliance with current practices and recommendations for safe operation and being properly trained to operate in stressful situations will help all of NH's responders to get home safe. Remember, often times getting there is far more dangerous than what you are responding to. Be safe!

Other Emergency Vehicle Laws of interest; 259:28, 265:33, 265:61, 266:73, 266:74.

I/C ENHANCEMENT 2006 TRANSITION PROGRAM ROLLOUTS FREQUENTLY ASKED QUESTIONS

Q: Does an I/C have to use the materials in the Transition Program notebook supplied by the Bureau of EMS?

A: No, If the I/C has materials that cover the objectives of the specific module they can use their own. The notebook contains “tools” that the I/C is welcomed to use.

Q: Can you use the transition program for a refresher?

A: No, the transition materials do not cover all the objectives of a refresher training program (RTP) but, the modules can be built into an RTP.

Q: Can students use the transition program as continuing education?

A: Yes, if separate from an RTP. If the topics are included in the RTP the hours cannot be “counted” twice.

Q: Can the Intermediate transition program be used as their 12 ALS hours?

A: Yes

Q: Is there a minimum number of hours to teach a module?

A: No, the goal is to make sure that the objectives are covered.

Q: Where is the KING-LTD airway on the list of required vehicle equipment?

A: You will find with the rule change that “two blind insertion airways” will be required. At this time the NH Medical Control Board has approved the Combi-tube, KING-LTD and Laryngeal Airway Masks (LMA's) as blind insertion airways.

Q: Do we need to teach both the Combi-tube and the KING-LTD?

A: Yes

Q: Who can teach LMA's?

A: Intermediate or Paramedic I/C's who is proficient in the skill, or a qualified approved designee.

Q: What if you have already taught a module of the program?

A: You may work with your Education Specialist to determine if you can back fill recent training.

Q: Can modules be taught over 6+ months?

A: Yes, work with your Education Specialist to complete necessary paperwork.

Q: Does the Bureau envision re-writing the practical exam?

A: Eventually, but you will be notified an ample time.

Q: By what date must these programs be complete?

A: For those re-licensing in NH, the transition must be completed prior to re-application. For new applicants the transition materials must be covered and the protocol exam completed before applying for licensure. The “Drop dead date” for all Providers will be March 31, 2008.

Q: Do NH-EMT's (“Grandfathered” non-Nationally Registered EMT's) have to complete this training?

A: Yes. At this time the only levels of licensed Provider that do not need to complete this training are First Responders and Apprentice levels.

Q: Where is the protocol exam?

A: Proceed with the following:

- * Go to www.nhtemsis.org,
- * Logon with your username and password
- * Read and accept the privacy statement, Click “YES”,
- * Click on Knowledge Base on the top menu bar, once in Knowledge Base,
- * Go down the left hand column and click on your level of licensure and follow the instructions of the page.

Q: How do non-licensed and/or first time applicants take the on-line protocol exam?

A: Proceed with the following:

- * Go to www.nhtemsis.org,
- * Logon with the user name: "applicant" and user password "applicant".
- * Read and accept the privacy statement, Click "YES",
- * Click on Knowledge Base on the top menu bar, once in Knowledge Base,
- * Go down the left hand column and click on your level of licensure and follow the instructions of the page.
- * After completing exam, BE SURE TO PRINT OUT A COPY FOR LICENSURE.

Q: Do paramedics need to do the Basic and Intermediate Transition Programs?

A: No, but remember that EMT-I's need to complete the EMT-B material in addition to the Intermediate modules.

Q: Is there a waiver process for new hires or out-of state applicants?

A: Yes, on an individual basis. The Unit Leader must send a request for waiver for these individuals to the Bureau Chief.

Q: Will you waive the 30 day notice for Course Authorizations?

A: This will be on an individual basis, work with your Education Specialist on this matter.

Q: I have an EMT (EMT-I or EMT-P) course going on now. Can the I/C put in paperwork now to add the modules to the course?

A: Contact your Education Specialist.

Q: Can I use non-instructor/coordinators to teach a module?

A: Yes, but remember that the Course Authorization for the modules is in a licensed I/C's name only. You will be required to supply the names of your assistant instructors.

Q: What paper work does the I/C need to keep on file?

A: Documentation of course participation and verification of competency. You may use the skill sheet, rosters and/or exams provided in the programs or you may use your own.

Q: Is this a one time event or will we need to teach these again?

A: Each provider will need to complete the program. The modules will become the standard for all entry level providers and RTP's. As Protocols change, so too will the material to be covered so the Bureau does see this process as an ongoing event.

Q: Where can we get Mark 1 Training kits?

A: Boundtree

Q: Mark 1 Kit training states that when administering the medication to "hold for 30 seconds" and the tubes label states "hold for 10 seconds"; which is correct?

A: It is recommended by Dr. Gougelet and Dr. Brinsfield that the tubes be held for 30 seconds.

Q: Where will the MARK 1 Kits be stored in the state?

A: In strategically, undisclosed locations.

Q: Who do we contact in real life if we need the ChemPak (stock pile of MARK 1 kits)?

A: Local dispatch, who will in turn contact the Office of Emergency Management.

Q: With the MARK 1 Kit, is there any urgency in administering the #2 tube before the #1?

A: Yes, following the directions, 1 before 2.

CONTACT INFORMATION:

Dr. Robert Gougelet: robert.m.gougelet@hitchcock.org

KING Airway, Rob Parson: 617-512-5886,
rparsons@kingsystem.com

Tri-Anim, Ron Reynolds: 877-207-4329

If further questions exist, please do not hesitate to contact your Educational Specialist;
Liza Burrill, Educational Coordinator or
Vicki Blanchard, ALS Coordinator.

All Bureau Staff contact information
is located on the Bureau web site:
www.state.nh.us/safety/ems

NEW HAMPSHIRE FIRE SERVICE PERSONNEL GO BEYOND THE STATE'S BOUNDARIES

- * Hanover Fire Chief Roger Bradley is in his second term representing the six New England states as their director to the Board of Directors of the International Association of Fire Chiefs. He will be seeking a third term in June at the Division meeting in Springfield.
- * Division of Fire Standards and Training and Emergency Medical Services Director Richard Mason is in his third year as Secretary for the North American Fire Training Directors which represents the fifty United States and the provinces of Canada. As Secretary he serves on the 5 person board of directors.
 - Director Mason also sits on the Commission on Professional Credentialing which oversees the Chief Fire Officer Designation program.
- * Director Bill Degnon, State Fire Marshal, has been recently named to the board of directors for the National Association of State Fire Marshals.

2007 NH Patient Care Protocols Rollout

Vicki Blanchard, ALS Coordinator

With the release of 2007 NH Patient Care Protocols I hope you find our newly formatted document easier to read and follow!

I will be conducting Protocol Rollouts to each of the NH Hospitals over the course of the next couple of months. These rollouts will be targeted toward NH EMS Hospital Coordinators and their EMS Unit's Training Officers. The purpose of the rollouts will be to update the EMS Hospitals Coordinators and Training Officers to the changes within the protocols. In turn the information will be brought back to the individual units and hospital staff to be disseminated among all our providers.

There are several changes within the protocols which include:

- * A new design!
- * An updated Preface
- * An updated Routine Patient Care Protocol with new charts
- * All cardiac protocols have been updated to the 2005 AHA Guidelines
- * A new airway management section with recommended skills procedures
- * Umbilical Vein Cannulation procedure protocol
- * An updated DNR protocol to coincide with the passage of House Bill 656
- * An updated Interfacility Transfer protocol to reflect some of the new NHTSA guidelines, released May 2006.
- * Hazardous Materials and Mass Casualties have been separated out into two new protocols
- * Nasogastric tubes were added to the cardiac arrest protocols
- * An updated Pediatric Nerve Agent Protocol
- * Advanced airway skill matrix
- * Skills matrix

As always, you can find the most current edition of the NH Patient Care Protocols on the web at: <http://www.nh.gov/safety/ems/protocol.html>

Innovative Trauma Program Under Development

By Clay Odell, EMTP, RN, Trauma Coordinator

A patient is brought to the local Emergency Department (ED) in bad shape. He is suffering from severe multi-trauma from a motorcycle crash. The helicopter is not available so the providers in this small ED are going to have to resuscitate this patient on their own. They go through the process smoothly and proficiently, partly because this is the third severely injured patient they've taken care of in the last hour. Is this an MCI? Nope. Level I or II trauma hospital? Nope, like I said it's a small local hospital.

The reason the team is working well together is because they are well into the scenario-based trauma team training program that's going on today. Their skills are improving with each new scenario. Oh, and the patient isn't real.

At the 2005 NH Trauma System Conference, held last November, attendees had an opportunity to see a new form of trauma training. A demonstration of scenario-based trauma team training using a high-tech manikin impressed many trauma system stakeholders throughout the state. Following this demo the group urged the Division of Fire Standards and Training and EMS to pursue acquiring the type of simulation equipment that was used, and to create a trauma team training program to take on the road.

We are pleased to report that we were able to use funds from a previous federal trauma grant to purchase a Laerdal SimMan, and took delivery of the device this past July. The SimMan is one of a new generation of Human Patient Simulation devices; computer-driven manikins that respond with extremely lifelike human physiology. The Division is working with Dartmouth-Hitchcock Medical Center and Dartmouth Medical School to create the curriculum that will help reinforce trauma resuscitation skills and trauma team management techniques to emergency departments throughout the state.

This project is currently under development with hopes to begin rolling the program out this fall. While the program is aimed toward the ED care of the multiple trauma patients, the Division is advocating that small rural hospitals recognize the significant resource that EMS providers are and include them in the training.

For more information on this innovative training program contact Clay Odell, Trauma Coordinator at:

codell@safety.state.nh.us or call 603-448-4927.

TEMSIS Updates

By Fred von Recklinghausen

As of September 2006, 80% of NH EMS Units are reporting with TEMSIS. Over 80,000.00 run have been entered into the system. We appreciate your continued support and are interested in any suggestions and/or comments you may have about our TEMSIS system. Some points of interest for you may be:

➤ HIPAA TRACKING

Documenting the use of Protected Health Information (PHI) is an important part of HIPAA. TEMSIS now has the ability for EMS Unit Leaders to review the uses of individual electronic PCR's. Located in the Run History, the button is shaped like a piece of paper with a padlock in the lower right hand corner. Any changes made to an original report should be accompanied by an addendum. Addendums are also displayed in the run history.

➤ TEMPLATES

TEMSIS has several Templates which can be used to document various types of calls. In general:

- For calls where you treat & transport the patient use the "Standard Run Form" template.

- The "Standard Run Form No Billing" is used only if you do not want a bill sent for this call. No billing information is collected by this template.
- For calls where the patient is treated, but not transported, use the "No Transport with Patient" template.
- For non-transporting services, use the "Non-Transporting Service" template.
- ALS Intercepts" template is used by the ALS provider who intercepts with the transporting service.
- The "Canceled Run" template is used for calls where there is no patient contact such as standbys, canceled enroute and no patient found calls.
- The "Interfacility Transport" template is used between nursing homes, hospitals, dialysis centers, etc. and contains no emergency info.



**Richard Ghent with fellow
EMT candidates.**

FIREFIGHTER/EMT CANDIDATE RECEIVES THE SILVER STAR

SPC Richard Ghent of Rochester wants to be a Firefighter, this has been his dream. It is becoming a reality...he is enrolled in an EMT class in Nottingham, and is enrolled in the New Hampshire Fire Academy Recruit School beginning March 5, 2007. This mature 20 year old has earned 2 Purple Hearts while serving our great country in Iraq during Operation Iraqi Freedom.

To get a better picture of his service, I will refer to the Union Leader web site: <http://www.unionleader.com/article.aspx?headline=Medal+only+confirms+what+proud+family+already+knew+about+Rochester's+Spc.+Ghent&articleId=6d5e158e-7978-4f62-a73b-e8185a261137>

In an open letter to the New Hampshire National Guard, Major General Kenneth Clark (New Hampshire Adjutant General) wrote about an injured soldier wanting to be a firefighter.

The Fire Academy contacted the General's office and then the Employer Support of the Guard and Reserve Committee Executive Director SGM (retired) Jim Goss was in contact with Director Mason. This started the process.

The City of Rochester Fire Department has initiated the process of hiring SPC Ghent as a member of their Call Company...Thank you RFD!

Free Training & Travel!

Not too many folks seem to be aware that the US Department of Homeland Security provides free to first responders of all disciplines training in various elements of emergency preparedness and response. This is provided through their National Domestic Preparedness Consortium (NDPC) which is made up of the Center for Domestic Preparedness in Anniston, Alabama, the New Mexico Institute of Mining and Technology, Louisiana State University, Texas A&M University, and the Department of Energy's Nevada Test Site.

These schools cover topics ranging from Incident Command, live agent HazMat training, terrorist bombing prevention and response training, biological attack preparedness and response to advanced training in dealing with weapons of mass destruction.

Although the diverse course offerings may require certain prerequisites, they are open to just about all first responders; firefighters, EMS personnel, law enforcement and others. These are all top-quality, professional training courses that are provided absolutely free of charge to the student and in most cases all transportation, food and lodging costs are also covered – usually up-front with no costs incurred by the students whatsoever! Many of these courses can also be brought here to New Hampshire to be held at just about any location.

Even the application process is simple. Just go to the website of the training partner you're interested in (the list is provided below), check their calendar for the course you want to take, fill out and print their application and fax it to us here at the Fire Academy. We'll review it and send it to the school. Once you're accepted, they'll contact you with the confirmation and all the travel arrangements will usually be made by them for you. More often than not, all you'd need to do is show up at the airport and be ready for some incredible training.

So, take a look at the offerings from these excellent training partners. If you see something you'd like to attend at their facilities, follow the application instructions. If you see one that you'd like brought here to New Hampshire, please contact Captain Bob Pragoff at (603) 271-1661 ext.106 or via email at rpragoff@safety.state.nh.us.

CPD at Anniston AL: <http://cdp.dhs.gov> (Resident and local courses)

New Mexico Tech: <http://respond.emrtc.nmt.edu/index.php> (Resident)

LSU: <http://www.doce.lsu.edu/ace/> (Local courses only)

Texas A&M: <http://teexweb.tamu.edu/nerrtc/> (Resident and online courses)

DOE Nevada: <http://www.nv.doe.gov/nationalsecurity/homelandsecurity/responder.htm> (Resident)

Statistics for 2006 Entrance Testing

The 2006 entrance testing was held in August and September. Thanks to over 150 staff instructors and department assistance from all over the state, testing went smoothly.

The list contains 384 eligible firefighter candidates, and will be looked at by over 60 fire departments who subscribe to the testing process.

Some Statistics:

A total of 501 candidates scheduled for entrance testing:

C.P.A.T.:

- * 232 candidates passed
- * 68 candidates fail
- * 199 no shows

Written Test:

- * 367 written candidate testers
- * 244 candidates passed
- * 123 candidates fail
- * 134 candidate no shows

Aerial Climb:

- * 365 candidates passed

The list includes 384 eligible candidates. 183 candidates passed all three of the 2006 testing events and are eligible to be hired for the next 26 months. The remaining candidates are eligible to be hired but have an expiration of 14 months or less.

My thanks go out to all of the people who made the testing a success.

Sincerely,



Entrance Testing Program Coordinator

IMPORTANT INFORMATION FOR UP COMING FIRE OFFICER I & II COURSE CANDIDATES:

So you want to take the Fire Officer I & II course at the Fire Academy in the near future? Here is what you need to know for prerequisites before you are able to take this course. To start, in the spirit of having to have the old Instructional Techniques for Company Officers 16-hour program to be eligible, be aware that it is no longer acceptable as the prerequisite for Fire Officer I & II. The NFPA Professional Standard for Fire Officer, 1021 (2003 edition), has changed to Fire Instructor I as the new prerequisite. We are no longer offering the 16-hour Instructional Techniques for Company Officers program, as it does not meet the current edition of the standard. The remaining prerequisites remain the same and they are; Firefighter II, and Incident Command System, (the 16 hour IS 200 level program, is the minimum acceptable prerequisite) not just the four hour NIMS class.

In addition, the NHFA Fire Officer I & II course is NOT seated as a first come, first served basis. Once the application period closes, a review committee will seat the class based on many factors, not the least of which is completeness of the application packet. Applicants should pay particular attention to items that must be supplied in support of the NHFA General Admission Application.

FIRE & EMS NEWS SUBSCRIPTION REQUEST FORM

AVAILABLE AT NO CHARGE TO NH FIREFIGHTERS AND EMS PROVIDERS

Subscriptions to the quarterly Newsletter are available to NH Firefighters and EMS Providers at no charge simply by completing the request below. If you already receive one, please do not fill out this request unless your information such as name, address, or fire department has changed.

Name: _____

Address: _____

Town: _____ State: _____ Zip: _____

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Rank: _____

Secondary Fire Department: _____ Rank: _____

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